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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in	full)					
Rice, Kathleen, , ,						
(b) Address (number and street) ☐ Check if address changed PO Box 744				Candidate's FEC Identification Number H4NY04075		
(c) City, State, and ZIP Co	de			3. Is This N	ew Amended	
Mineola		NY 1150	1	Statement (N	I) OR (A)	
4. Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate		
DEMOCRATIC PARTY	House		NY	04		
	DESIGNATION O	F PRINCIPAL	CAMPAIGN	N COMMITTEE		
7. I hereby designate the follo	owing named political committ	ee as my Principal	Campaign Comn	nittee for the 2022 (year of elec	election(s).	
NOTE: This designation sh	nould be filed with the appropr	ate office listed in t	he instructions.			
(a) Name of Committee (in	ı full)					
Kathleen Rice	for Congress					
(la) A dalara a (records a residual	-44\					
(b) Address (number and s PO Box 744	street)					
(c) City, State, and ZIP Co	de					
Mineola			NY	11501		
Willioola						
I hereby authorize the follocandidacy.	•	ing Joint Fundraisir n is NOT my princip		,	pend funds on behalf of my	
NOTE: This designation sh	nould be filed with the principal	campaign committ	ee.			
(a) Name of Committee (in	n full)					
Rice Victory F	und					
(b) Address (number and s	street)					
PO Box 744						
(c) City, State, and ZIP Co	de					
Mineola			NY	11501		
I certify that I	have examined this Statemen	t and to the best of	my knowledge a	and belief it is true, correct	and complete.	
Signature of Candidate				Date		
Rice, Kathleen, , ,						
Rice, Raimeen, , ,		[Elec	tronically Filed]	11/14/2020		
NOTE: Submission of false, e	rroneous, or incomplete inforn	nation may subject	he person signir	ng this Statement to penal	ties of 2 U.S.C. §437g.	
				1		

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